

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2009 JAN 13 AM 9:18

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

IMPORTANT: Indicate by # type of committee you are reporting for: 1
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Dolores M. Mertz

Political Party (if applicable)

Democrat

Office Sought

STATE REPRESENTATIVE

District (if Senate or House)

8th

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>527</u>
Logged In	<u>S</u>
Scanned	<u>WRS WRS</u>
Computer	<u>WRS WRS</u>
Audited	<u>5-27-09</u>

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Dolores Thilges
SIGNATURE OF PERSON FILING REPORT

515-924-3609
TELEPHONE

1-12-09
DATE SIGNED

I AM FILING A 1-20-09 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

28,379.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

616 3100.00

3,523.30

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

31,902.91

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

616 11,037.19

11,460.49

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

20,442.42

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

**UNPAID BILLS (From Schedule D - Attach Schedule D)

7,951.08

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/22/08	ID# XXXX CK#	cK. # 895 TO Amiee Collins cancelled check lost so Dolores paid personally MOVED TO SCH B BY AUDITOR		\$73.30	<input type="checkbox"/>
11/3/08	ID# CK# 15998	Donald D. Avenson 30 Maplewood Dr. Oelwein, Ia 50662		100.00	<input type="checkbox"/>
11/3/08	ID# 9697 CK# 1049	Munipac 1735 NE 70th St. Ankeny, Iowa 50021		250.00	<input type="checkbox"/>
11/3/08	ID# 9761 CK# 1005	IWDAPAC Todd Landt		300.00	<input type="checkbox"/>
11/3/08	ID# 396 6113 CK# 4121	AFSCME/Iowa Public Employees 4320 N.W. Second Ave Des Moines, Ia 50313		500.00	<input type="checkbox"/>
11/10/08	ID# CK#	Dale Beam Onawa, Iowa 51040		500.00	<input type="checkbox"/>
11/12/08	ID# 6001 CK# 4570000231	Nationwide Mutual Insurance Co. 1100 Locust Rd. Des Moines, Ia 50391		250.00	<input type="checkbox"/>
12/2/08	ID# 9782 CK# 1019	Elk Run Energy L/S Power Development 400 Chesterfield Center STE 110		250.00	<input type="checkbox"/>
1/12/09	ID# 6004 CK# 4866	Ass. Gen. Contractors of Ia 701 E. Court Ave Des Moines, Iowa 50309		250.00	<input type="checkbox"/>
1/12/09	ID# CK# 4667	Robert L. Kohlwes 804 SW Cohasset Drive Ankeny Ia 50023		100.00	<input type="checkbox"/>

SUB-TOTAL
\$ 2573.30
TOTAL (if last page of this schedule)
\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	
ONLY CHANGE IS DATES	

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/22/08	ID# CK#	cK. # 895 TO Amiee Collins cancelled check lost so Dolores paid personally <i>Moved to Sch B by Auditor</i>		\$73.30	<input type="checkbox"/>
11/3/08	ID# CK# 15998	Donald D. Avenson 30 Maplewood Dr. Oelwein, Ia 50662		100.00	<input type="checkbox"/>
11/3/08	ID# 9697 CK# 1049	Munipac 1735 NE 70th St. Ankeny, Iowa 50021		250.00	<input type="checkbox"/>
11/3/08	ID# 9761 CK# 1005	IWDAPAC Todd Landt		300.00	<input type="checkbox"/>
11/3/08	ID# 596 6113 CK# 4121	AFSCME/Iowa Public Employees 4320 N.W. Second Ave Des Moines, Ia 50313		500.00	<input type="checkbox"/>
11/10/08	ID# CK#	Dale Beam Onawa, Iowa		500.00	<input type="checkbox"/>
11/12/08	ID# 6001 CK# 4570000231	Nationwide Mutual Insurance Co. 1100 Locust Rd. Des Moines, Ia 50391		250.00	<input type="checkbox"/>
12/2/08	ID# 9782 CK# 1019	Elk Run Energy L/S Power Development 400 Chesterfield Center STE 110		250.00	<input type="checkbox"/>
1-4-09	ID# 6004 CK# 4866	Ass. Gen. Contractors of Ia 701 E. Court Ave Des Moines, Iowa 50309		250.00	<input type="checkbox"/>
1-10-09	ID# CK# 4667	Robert L. Kohlwes 804 SW Cohasset Drive Ankeny Ia 50023		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2573.30	
TOTAL (if last page of this schedule)				\$	

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Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 58B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/12/09	ID# 6351 CK# 1531	Petroleum Marketers & Convenience Stores of Ia. 1430 New York Ave STE F Urbandale, Ia 50322		\$250.00	<input type="checkbox"/>
1/12/09	ID# 6101 CK# 3569	Truck PAC Iowa PO Box 6121 East Des Moines STN Des Moines, Ia 50309		100.00	<input type="checkbox"/>
1/12/09	ID# 6056 CK# 3849	Bankers Unite In Legislative Decisions 8800 NW ^2nd Avenue Johnston, Ia 50131-6200		250.00	<input type="checkbox"/>
	ID# CK# 843	ck turned 7/2/08 cancelled never cashed See Sch R3		350-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

9/8 \$600 SUB-TOTAL

TOTAL (if last page of this schedule)

9/8 3100.00

\$950-

3523.30

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Page 2 of 2
(for Schedule A)

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**CHECK THIS BOX IF
AMENDING FORM

ONLY CHANGE IS DATES

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

2009 NOV 13 AM 7:50

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
1-8-09	ID# 6351 CK# 1531	Petroleum Marketers & Convenience Stores of Ia. 1430 New York Ave STE F Urbandale, Ia 50322		\$250.00	<input type="checkbox"/>
1-10-09	ID# 6101 CK# 3569	Truck PAC Iowa PO Box 6121 East Des Moines STN Des Moines, Ia 50309		100.00	<input type="checkbox"/>
1-08-09	ID# 6056 CK# 3849	Bankers Unite In Legislative Decisions 8800 NW 2nd Avenue Johnston, Ia 50131-6200		250.00	<input type="checkbox"/>
	ID# CK# 843	ck dated 2/3/08 cancelled never cashed See Sch B		350-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

5/13 \$600.00 SUB-TOTAL

TOTAL (if last page of this schedule)

5/13 \$3100.00

\$ 950-

3523.30

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Page 2 of 2
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/30/08	ID# CK# 991	Family Table Restaurant 11 SW 7th Street Pocahontas, Ia 50574	coffee & rolls & dinner for workers	\$ 250.00
10/30/08	ID# CK# 992	Unkies Restaurant Thor, Iowa	Meals for Workers	103.27
10/31/08	ID# CK# 993	Family Table Restaurant Hwy. 169 Algona, Iowa 50511	Coffee & breakfast for open house	\$335.00
10/31/08	ID# CK# 994	David McCullough Livermore, Iowa 50558	Contribut. for constution had house fire	\$100.00
10/31/08	ID# CK# 995	Billy Jo's State Street Algona, Iowa 50511	meals for workers	20.00
11/3/08	ID# CK# 996	Day Lite Donuts State Street Algona, Iowa 50511	open house coffee & donuts	153.43
11/09/08	ID# CK# 997 1001	The Laurens Sun & Reminder P.O. Box 125 Laurens, Iowa 50554	Adds	1192.01
11/09/08	ID# CK# 998 1002	The Algona Publishing Co. 14 E. Nebr. Algona, Iowa 50511	Adds	2022.76
SUB-TOTAL				\$ 4176.47
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

Page 1 of 4

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/09/08	ID# CK# 1003	West Bend Journal & Whittemore Ind. 223 S. Broadway, Westend Ia 50597	adds	\$ 611.33
11/09/08	ID# CK# 1004	The Spokesman P.O. Box 670 Iowa Falls Ia 50126	Adds	515.16
11/09/08	ID# CK# 1005	The Humboldt Ind. P.O. Box 157 Humboldt, Iowa 50548	Adds	998.93
11/09/08	ID# CK# 1006	Humboldt Reminder P.O. Box 549 Humboldt, Iowa 50548	Adds	1142.30
11/12/08	ID# CK# 1007	The Messenger 713 Central Avenue P.O. Box 659 Fort Dodge, Ia 50501	adds	233.50
11/12/08	ID# CK# 1008	Algona Publishing Co 14 E. Nebr. Algona, Iowa 50511	adds	190.86
11/12/08	ID# CK# 1009	U.S. Postmaster Burt, Iowa 50522	postage	42.00
11/12/08	ID# 1010 CK# 1110	Printing Plus 306 E. State St. Algona, Iowa 50511	printing brochure	42.80
SUB-TOTAL				\$ 3776.88
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 2 of 4

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/14/08	ID# CK# 1011	Pocahontas Record Democrat P.O. Box 128 Pocahontas Ia 50574	Adds	\$ 616.90
12/2/08	ID# CK# 1012	West Bend Journ. & Whitt. Ind. 223 S. Broadway Box 47 West Bend, Ia 50597	Adds	58.20
12/5/08	ID# CK# 1013	Computer Systems Assoc 107 East State Algona, Iowa 50511	computer supplies	28.88
12/5/08	ID# CK# 1014	Algona Publishing Co 14 E. Nebr Algona, Iowa 50511	Add	63.00
12/20/08	ID# CK# 1016	Good Samaritan 412 W. Kennedy St. Algona, Iowa 50511	Donation	100.00
12/20/08	ID# CK# 1017	Algona Area Chamber of Comm. 123 E. State St. Algona, Iowa 50511	Membership	130.00
12/20/08	ID# CK# 1018	Seton Grade School 808 East Lucas St. Algona, Iowa 50511	Donation for Ed. Fair	100.00
12/20/08	ID# CK# 1019	The Spokesman PO Box 670 Iowa Falls, Ia 50126	Adds-brochures	530.72
SUB-TOTAL				\$ 1627.70
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/20/08	ID# CK# 1020	Humboldt Independent P.O. Box 157 Humboldt, Ia 50548	Add	\$ 72.97
11/14/08	ID# CK# 1015	Pocahontas Record Democrat P.O. Box 128 Pocahontas Ia 50574	Add	49.60
12/20/08	ID# CK# 1021	Humboldt Reminder PO Box 549 Humboldt Ia 50548	Add	75.86
1/09/09	ID# CK# 1022	Computer Systems Assoc. 107 East State Street Algona, Iowa 50511	Inkjet Cartridge	28.88
1/09/08	ID# CK# 1023	Humboldt Independent PO Box 157 Humboldt, Iowa 50548	Thank yous	218.93
1/09/09	ID# CK# 1024	Dolores Mertz 607 110th St Ottosen, Iowa 50570	Lodging- Candy for parades & flight for ALEC Mtg.	1433.20
9/22/08	ID# CK#	Amy Collins 308 Robinson Dr Algona, IA 50511	CK # 895 issued 9-22-08 was lost - Candidate replaced	(73.30)
12/31/08	ID# CK#	Council of Gov 701 East 22nd St Suite 110 Lombard, IL 60148-5095	with personal check CK # 843 issued 2-2-08 for registration never cashed	(350.00)
SIB 1456.14 SUB-TOTAL				\$ 1879.44
TOTAL (if last page of this schedule)				\$ 11,410.49
SIB 11,037.19				

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MERTZ FOR REPRESENTATIVE

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/27/08	HOUSE TRUMAN FUND 5661 FLEUR DR. DES MOINES, IA 50321		copywriting, design .pre-press, printing & bindery	\$ 4,111.03	<input type="checkbox"/>
10/27/08	HOUSE TRUMAN FUND 5661 FLEUR DR. DES MOINES, IA 50321		mail processing & postage	927.30	<input type="checkbox"/>
10/28/08	IOWA FARM BUREAU 5400 UNIVERSITY AVENUE WEST DES MOINES, IA 50266-5997		mailings	2,912.75	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 7,951.08	
TOTAL (if last page of this schedule)				\$ 7,951.08	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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